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Attorney Docket Number

| Attorney Docket Number | 6392-06/DFH

		DES	SIGN			First Named	Inventor	A, Valerie D	umont			
	PATE	NT AF	PLIC	ATIO	N	COMPLETE IF KNOWN						
	(37 CF	R 1.63	3)		Application Number						
	Declaration		r	Declarat Submitte Filing (se	ion	Filing Date		1				
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	Filing		((37 ČFR	R 1.16 (e))	Examiner N	ame	 				
<u></u>				required	1)				·			
l here	by declare that:											
	Each inventor's residence, mailing address, and citizenship are as stated below next to their name.											
l belie	I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for											
which a patent is sought on the invention entitled:												
SEL	SELF-TANNING COMPOSITION IN SHEETED SUBSTRATE											
										11		
	(Title of the Invention)											
the sp	the specification of which											
	is attached he	reto										
	OR											
V	was filed on (MI	M/DD/Y^	w [02/26/2002	as Unit	tod Statos Ar	onlication N	umber or P	CT International		
	1		· · · / L			as on	ied Otates Ap			OT International		
Applic	Application Number PCT/CA02/00234 and was amende					ed on (MM/E	DD/YYYY)	_	(if applicable).			
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.												
					tion which is mat							
					ormation which be te of the continuat			n the filing	date of the	prior application		
l here	by claim foreign	priority	benefits	s unde	r 35 U.S.C. 119(a	a)-(d) or (f)	or 365(b) o					
					(s), or 365(a) of a ica, listed below a							
applica	ation for patent,	inventor	's or pla	nt bree	der's rights certific							
	that of the applic		n which	priority	is claimed. Foreign Filin	n Date	Prio	rity	Certified	Copy Attached?		
	Number(s)	ation	Cour	ntry	(MM/DD/Y		Not Cla		Yes	No No		
CA 2,3	38,124		CA		02/26/2001							
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ПА	Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.											
<u> </u>	[Page 1 of 2]											

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/01 (06-03)
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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	r Number:	nber: 23477			OR Corresp			pondence address below		
Name										
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.										
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor										
Given Name (first and middle [if any]) Valerie Dum		Family Name or Surname DICIANNA								
Inventor's Signature						Date				
Residence: City	State				Country			Citizenship		
Concord Ontario					Canada			Canadian		
Mailing Address c/o CMI Cosmetic Manufacturers Inc., 665 Millway Avenue, Unit #26										
City	State				ZIP				Country	
Concord	Ontariio		L4K 3T8				CANADA			
	NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])			Family Name or Surname							
Inventor's Signature									Date	
Residence: City			Country		Citize		Citizei	enship		
Mailing Address										
City		ZIP		Country						
Additional inventors or a legal re	presentative are be	ing named on	thes	suppleme	ntal she	et(s) PT(D/SB/02A	or 02LR	attached hereto.	